Fill in this information to identify you	r case:	
United States Bankruptcy Court for the:  DISTRICT OF NEVADA		
Case number (if known):	Chapter you are filing under:  ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13	Check if this is a amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. You	ır full name		
gov	te the name that is on your ernment-issued picture	GENE First Name	CHRISTINA First Name
you	ntification (for example, r driver's license or sport).	S. Middle Name	M. Middle Name
F	-p	MOAFANUA	MOAFANUA
	ng your picture ntification to your meeting	Last Name	Last Name
with	the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
	other names you		CHRISTINA
hav yea	e used in the last 8 rs	First Name	First Name
		Middle Name	Middle Name
	ude your married or den names.		LELEUA
mai	den names.	Last Name	Last Name
	y the last 4 digits of ir Social Security	xxx - xx - <u>3</u> <u>6</u> <u>4</u> <u>8</u>	xxx - xx - <u>6</u> <u>4</u> <u>0</u> <u>2</u>
nun	nber or federal ividual Taxpayer	OR	OR
	ntification number	9xx - xx	9xx - xx

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Debtor 1 GENE First Name		S. Middle Name	MOAFANUA Last Name	Case number (if known)			
	First Name						
		About Deb	otor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer	<b>☑</b> I have	e not used any business names o	or EINs.  I have not used any business names or EINs.			
	Identification Numbers (EIN) you have used in the last 8 years	Business nar	me	Business name			
	Include trade names and	Business na	me	Business name			
	doing business as names	Business na	me	Business name			
		EIN					
		EIN —					
5.	Where you live			If Debtor 2 lives at a different address:			
		3310 LUC	CERNE WAY	3310 LUCERNE WAY			
			Street	Number Street			
		SPARKS	NV 89432	SPARKS NV 89432			
		City	State ZIP Code	City State ZIP Code			
		WASHOE		WASHOE			
		County		County			
		the one ab	iling address is different from bove, fill it in here. Note that the end any notices to you at this dress.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.			
		3310 LUC	CERNE WAY	3310 LUCERNE WAY			
		Number S	Street	Number Street			
		P.O. Box		P.O. Box			
		SPARKS	NV 89432	SPARKS NV 89432			
		City	State ZIP Code	City State ZIP Code			
6.	Why you are choosing this district to file for	Check one	e:	Check one:			
	bankruptcy	petitio	the last 180 days before filing this on, I have lived in this district long n any other district.	· · · · · · · · · · · · · · · · · · ·			
			e another reason. Explain. 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)			
	Tall the Oas	Al ( V F	)				
F	Tell the Cou	rt About Your E	Sankruptcy Case				
7.	The chapter of the Bankruptcy Code you			see Notice Required by 11 U.S.C. § 342(b) for Individuals Filin top of page 1 and check the appropriate box.			
	are choosing to file under	✓ Chapte	r 7				
		☐ Chapte	r 11				
		☐ Chapte	r 12				
		□ Chapte	r 13				

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Deb	otor 1 <b>GENE</b>	S.	MOAFANUA	Case number (if kno	own)
	First Name	Middle Name	Last Name	•	,
8.	How you will pay the fee	cour pay	pay the entire fee when I file my t for more details about how you ma with cash, cashier's check, or money llf, your attorney may pay with a cred	y pay. Typically, if you a order. If your attorney is	re paying the fee yourself, you may s submitting your payment on your
			ed to pay the fee in installments. I iduals to Pay Your Filing Fee in Inst	,	
		By la than fee i	uest that my fee be waived (You raw, a judge may, but is not required to 150% of the official poverty line that in installments). If you choose this of Fee Waived (Official Form 103B) a	o, waive your fee, and m t applies to your family si ption, you must fill out th	ay do so only if your income is less ze and you are unable to pay the e Application to Have the Chapter 7
9.	Have you filed for	<b>☑</b> No			
	bankruptcy within the last 8 years?	☐ Yes.			
	•	District		When	Case number
				MM / DD / \	
		District _			Case number
		<b>-</b>		MM / DD / \	
		District _		When MM / DD / \	Case number
10.	Are any bankruptcy	<b>⋈</b> No			
	cases pending or being	☐ Yes.			
	filed by a spouse who is not filing this case with	_		Dala	tionabia ta
	you, or by a business	Debtor _		Rela	tionship to you
	partner, or by an affiliate?	District _		When	Case number,
				IVIIVI / DD /	TIT II KIIOWII
		Debtor		Rela	tionship to you
		District		When	Case number,
					YYYY if known
11.	Do you rent your residence?	✓ No. ☐ Yes.	Go to line 12.  Has your landlord obtained an eviresidence?	ction judgment against y	ou and do you want to stay in your
			No. Go to line 12. Yes. Fill out Initial Statemen and file it with this bankruptc	•	ment Against You (Form 101A)

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Deb	tor 1	GENE First Name	S. Middle N	amo	MOAFANUA Last Name	Case number (	if known)		
P:	art 3:	•			sses You Own as a So	ole Proprietor			
	Are you	u a sole proprietor full- or part-time		No. (	Go to Part 4.  Name and location of busin	·			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.				Name of business, if any  Number Street				
	sole pro	ave more than one oprietorship, use a e sheet and attach it petition.			Health Care Business Single Asset Real Es Stockbroker (as defin	to describe your business: s (as defined in 11 U.S.C. § tate (as defined in 11 U.S.C ed in 11 U.S.C. § 101(53A) s defined in 11 U.S.C. § 10	(101(27A)) C. § 101(51B))	ZIP Co	de
(   	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business			s <i>et ap</i> t recei	filing under Chapter 11, the oppropriate deadlines. If you not balance sheet, statement if these documents do not ex	indicate that you are a sma of operations, cash-flow sta	II business del atement, and f	btor, you ederal ind	must attach your come tax return
	debtor	debtor?		No.	I am not filing under Chapt	er 11.			
		For a definition of small business debtor, see		No.	I am filing under Chapter 1 the Bankruptcy Code.	filing under Chapter 11, but I am NOT a small business debtor according to the definition in Bankruptcy Code.			
	11 U.S.	C. § 101(51D).		Yes.	I am filing under Chapter 1 Bankruptcy Code.	1 and I am a small busines	ss debtor accor	rding to th	ne definition in the
Pa	art 4:	Report If You C	Own or	Hav	e Any Hazardous Pro	perty or Any Property	y That Need	ds Imm	ediate Attention
14.	propert alleged immine	own or have any ty that poses or is to pose a threat of that and identifiable		No Yes.	What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?				If immediate attention is no	eeded, why is it needed?			
	perisha livestoc	mple, do you own ble goods, or k that must be fed, or ng that needs urgent			Where is the property?Nur	nber Street			
					City	,		State	ZIP Code

Debtor 1 GENE S. MOAFANUA Case number (if known) Last Name

### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

About Debtor 1:

 Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one:

☑ I received a briefing from an approved credit
counseling agency within the 180 days before I
filed this bankruptcy petition, and I received a
certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required	to	receive	а	briefing	about
credit counseling	j be	ecause	of		

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

# ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1	GENE First Name	S. Middle N	ame	MOAFA Last Name		Case number (if	f know	n)
P	art 6:	Answer These	Quest	ions f	or Reporting	Purpos	es		
16.	What k have?	ind of debts do you	16a.	as "ii		dividual pr 16b.	sumer debts? Consumer dimarily for a personal, family		re defined in 11 U.S.C. § 101(8) usehold purpose."
			16b.	mone	•	s or invest 16c.	iness debts? Business det ment or through the operatio		debts that you incurred to obtain e business or investment.
			16c.	State	e the type of deb	ts you owe	e that are not consumer or bu	usines	s debts.
17.	Are you	u filing under r 7?		No.	I am not filing u	nder Chap	ter 7. Go to line 18.		
	any ex	estimate that after empt property is	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property administrative expenses are paid that funds will be available to distribute to						
	are pai availab	ed and strative expenses d that funds will be le for distribution ecured creditors?			✓ No  Yes				
18.	How m	any creditors do timate that you		1-49 50-99 100-19 200-99			1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you te your assets to th?		\$100,0	0,000 01-\$100,000 001-\$500,000 001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you te your liabilities to		\$100,0	0,000 01-\$100,000 001-\$500,000 001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

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Debtor 1	GENE First Name	S. Middle Name	MOAFANUA Last Name	Case number (if known)				
Part 7:	Sign Below							
For you		I have examined this petition, and I declare under penalty of perjury that the information provid and correct.						
		am aware that I may proceed, if eligible, under Chapter 7, 11, 12, iderstand the relief available under each chapter, and I choose to						
		pay or agree to pay someone who is not an attorney to help me d read the notice required by 11 U.S.C. § 342(b).						
		I request relie	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		connection w	•	concealing property, or obtaining money or property by fraud in sult in fines up to \$250,000, or imprisonment for up to 20 years, and 3571.				
			E S. MOAFANUA MOAFANUA, Debtor 1	X /s/ CHRISTINA M. MOAFANUA CHRISTINA M. MOAFANUA, Debtor 2				
		Executed	on <u>05/20/2016</u> MM / DD / YYYY	Executed on 05/20/2016 MM / DD / YYYY				

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Debtor 1	GENE First Name	S. Middle Name	MOAFANUA Last Name	Case number (if known	)
represente	not represented by y, you do not need	eligibility to pro relief available the debtor(s) the	oceed under Chapter 7, 11, 12 under each chapter for which ne notice required by 11 U.S.	n the person is eligible. I also C. § 342(b) and, in a case in w	es Code, and have explained the certify that I have delivered to
			P. Patterson, Esq.  of Attorney for Debtor		05/20/2016 MM / DD / YYYY
		Printed nar	terson., Esq.		
		Reno City		NV State	89501 ZIP Code
		Contact ph  5736  Bar numbe		Email address Illegalp  State	at@aol.com

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F	II in this inf	ormation to id	entify your case	e and this filing:		
De	ebtor 1	GENE	S.	MOAFANUA		
		First Name	Middle Name	Last Name		
	ebtor 2	CHRISTINA	M.	MOAFANUA		
(S	pouse, if filing)	First Name	Middle Name	Last Name		
Ur	nited States Bar	nkruptcy Court for	the: <b>DISTRICT OF</b>	NEVADA		
	ase number known)				<del></del> -	if this is an ded filing
Off	ficial Form	106A/B				
Sc	hedule A/	B: Property				12/15
	Do you own o	scribe Each Re	esidence, Build	, write your name and case numb ing, Land, or Other Real Es	tate You Own or Have	
2.				l of your entries from Part 1, inclu		\$0.00
Pa	art 2: Des	scribe Your Ve	hicles			
			•	in any vehicles, whether they are, also report it on Schedule G: Exec	•	•
3.	Cars, vans, tr	ucks, tractors, sp	ort utility vehicles,	motorcycles		
	□ No ☑ Yes					
3.1. Mak		JEEP	Check or		Do not deduct secured claimount of any secured claimount of the Creditors Who Have Claim	
Mod		GRAND CHI 2000		or 1 only or 2 only	Current value of the	Current value of the
	roximate milea			or 1 and Debtor 2 only	entire property?	portion you own?
	er information:	ge. <u>210,000</u>	At le	ast one of the debtors and another	\$2,100.00	\$2,100.00
200		ND CHEROKEE miles)	<u></u>	ck if this is community property instructions)		
LA\ THI	WSUIT. HE WE DEBTOR IS	AS A POSSIBLE /AS IN AN ACCI : JUST SEEKING S VEHICLE. TH	DENT. 3			

Official Form 106A/B Schedule A/B: Property page 1

WAS NO PHYSICAL DAMAGE. THERE WAS ABOUT \$500 OF DAMAGE.

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Debto	or 1 <b>GENE</b>	S.	MOAFANUA	Case number (if known)	
	First Name	Middle Name	Last Name		
3.2.			Who has an interest in the property?	Do not deduct secured cla	•
Make	:	FORD	Check one.	amount of any secured cla	
Mode	el:	EXPLORER	Debtor 1 only	Creditors Who Have Claim	
Year:		1994	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Appro	oximate mileage:	400,000	✓ Debtor 1 and Debtor 2 only  At least one of the debtors and anot		\$700.00
1994	r information: FORD EXPLO 100 miles)	RER 4-door (approx.	_	<u> </u>	
			and other recreational vehicles, other al watercraft, fishing vessels, snowmobile		
	☑ No □ Yes				
			own for all of your entries from Part 2, i Part 2. Write that number here		\$2,800.00
Pa	rt 3: Descr	ibe Your Personal	and Household Items		
Do yo	ou own or have a	any legal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
		s and furnishings appliances, furniture, line	ens, china, kitchenware		
	□ No ☑ Yes. Describ	e THE DEBTORS	HAVE USED FURNITURE AND HOU	JSEHOLD GOODS.	\$3,000.00
	•		video, stereo, and digital equipment; com evices including cell phones, cameras, me		
	□ No ☑ Yes. Describ	e THE DEBTORS	HAVE A ACER LAPTOP. IT IS 4 YR	S OLD.	\$100.00
		ues and figurines; paintin	gs, prints, or other artwork; books, picture collections; other collections, memorabilia,	•	
	☑ No ☐ Yes. Describ	e			
	Examples: Sports		, and other hobby equipment; bicycles, potools; musical instruments	ool tables, golf clubs, skis;	
	☑ No ☐ Yes. Describ	e			
	Firearms Examples: Pistol	s, rifles, shotguns, ammu	inition, and related equipment		
	No ✓ Yes. Describ	e THE DEBTORS	HAVE A GLOCK 9mm PISTOL.		\$300.00
	<b>Clothes</b> <i>Examples:</i> Every	day clothes, furs, leather	coats, designer wear, shoes, accessories	6	
	□ No ☑ Yes. Describ	e THE DEBTORS	HAVE CLOTHING.		\$400.00

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Deb		GENE	S.	MOAFANUA	Case number (if known)	
		First Name	Middle Name	Last Name		
12.	Jewelry Example		elry, costume jewe	elry, engagement rings, wedding	rings, heirloom jewelry, watches, gems	,
	□ No ✓ Yes.	Describe <b>T</b>	HE DEBTORS I	HAVE JEWELRY.		\$500.00
13.	Example	<b>m animals</b> es: Dogs, cats, bi	rds, horses			
	✓ No ☐ Yes.	Describe				
14.	Any oth did not	•	household items	s you did not already list, includ	ling any health aids you	
		Give specific				
15.				s from Part 3, including any ent		\$4,300.00
Pa	art 4:	Describe Yo	our Financial <i>i</i>	Assets		
Do y	you own	or have any lega	al or equitable in	terest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	es: Money you ha	ave in your wallet,	in your home, in a safe deposit b	ox, and on hand when you file your	
	□ No ✓ Yes.				Cash:	\$20.00
17.	•	-	uses, and other si	ancial accounts; certificates of de milar institutions. If you have mu	•	
	□ No ✓ Yes.		Insti	tution name:		
	17.	1. Checking a	count: Che	ecking account (BANK OF A	MERICA)	\$0.00
	17.	2. Savings acc	count: Sav	ings account (BANK OF AM	ERICA)	\$5.00
18.			r publicly traded nvestment accour	stocks nts with brokerage firms, money n	narket accounts	
	□ No ✓ Yes.		Institution or is	suer name:		
			THE DEBTO TIME.	R HAS 30 SHARES OF STO	CK. HE IS NOT VESTED AT THIS	3
			HE GETS 7.5	5 SHARES IN 10-16.		\$1,635.00

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Debt		S.	MOAFANUA	Case number (if known)	
	First Name	Middle Name	Last Name		
19.	Non-publicly traded sto an interest in an LLC, p		•	orated businesses, including	
	✓ No  Yes. Give specific information about them	Name of entity:		% of ownership:	
20.	Negotiable instruments i	nclude personal check	r negotiable and non-negot ss, cashiers' checks, promiss not transfer to someone by s	sory notes, and money orders.	
	No Yes. Give specific information about them	Issuer name:			
21.	Retirement or pension Examples: Interests in II profit-sharing	RA, ERISA, Keogh, 40	01(k), 403(b), thrift savings a	ccounts, or other pension or	
	No  ✓ Yes. List each account separately.	Type of account:	Institution name:		
	,		n. THE DERTOR HAS A	401(k) WITH HIS EMPLOYER	\$200.00
22.		deposits you have ma	• •	e service or use from a company c, gas, water), telecommunications	
	Yes		Institution name or individua		<b>*</b> 000 00
	Electric:		Electric company depos	SIT.	\$238.00
	Security of	deposit on rental unit:	Security deposit on ren	tal unit	\$600.00
	Water:		Water deposit		\$100.00
23.	<b>☑</b> No	or a specific periodic p		ner for life or for a number of years)	
24.	Interests in an education 26 U.S.C. §§ 530(b)(1),			am, or under a qualified state tuition prog	ıram.
	✓ No ☐ Yes	Institution name a	nd description. Separately fi	le the records of any interests. 11 U.S.C. §	521(c)
25.	Trusts, equitable or fut powers exercisable for		erty (other than anything lis	sted in line 1), and rights or	
	<ul><li>✓ No</li><li>✓ Yes. Give specific information about th</li></ul>	em		-	
26.			ets, and other intellectual poroceeds from royalties and		
	No ☐ Yes. Give specific information about the	em		-	
27.	Licenses, franchises, a Examples: Building perr			oldings, liquor licenses, professional license	es
	<ul><li>✓ No</li><li>✓ Yes. Give specific information about the</li></ul>	em		-	

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Debt	or 1	GENE	S.	MOAFANU	A Case number (if k	inown)	
Mon	ey or p	First Name property owed t	Middle N	lame Last Name		_	Current value of the portion you own?
							Do not deduct secured claims or exemptions.
28.	Tax re	funds owed to	you				
	✓ No	o es. Give specific	c information			Federa	l: <b>\$0.00</b>
	ab	out them, includ u already filed th	ling whether			State:	\$0.00
		d the tax years				Local:	\$0.00
	-	/ support oles: Past due o	r lump sum alir	nony, spousal support, child	d support, maintenance, divorce settl	ement, propert	y settlement
	✓ No	o es. Give specific	cinformation		Alim	iony:	\$0.00
	ш	·				ntenance:	\$0.00
					Sup	port:	\$0.00
					Divo	orce settlement	<b>\$0.00</b>
					Prop	perty settlemen	t: <b>\$0.00</b>
	✓ No	·		curity benefits; unpaid loans	you made to someone else		
		sts in insurance	•	surance: health savings acc	count (HSA); credit, homeowner's, or	renter's insura	ince
	✓ No		dbinty, or me in	Saranoo, noam savings acc	out (1071), creat, nomeowners, or	Territor o modra	1100
	_	es. Name the insempany of each p					
		d list its value		npany name:	Beneficiary:	Su	urrender or refund value:
	If you a	are the beneficia	ary of a living tr	you from someone who h ust, expect proceeds from a someone has died	as died I life insurance policy, or are currently	ý	
	✓ No	o es. Give specific	information				
		•		<b>er or not you have filed a l</b> isputes, insurance claims, o	lawsuit or made a demand for payr or rights to sue	nent	
	✓ No	es. Describe eac	ch claim				
		contingent and to set off claim	-	claims of every nature, inc	cluding counterclaims of the debto	r and	
	✓ No	o es. Describe ead	ch claim				
35.	Any fir	nancial assets	you did not alı	eady list			
	✓ No	o es. Give specific	information				
			-	ntries from Part 4, includir	ng any entries for pages you have	→	\$2,798.00

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Deb	tor 1	GENE First Name	S. Middle Name	MOAFANUA Last Name	Case number (if kno	wn)	
Pá	art 5	Describe A	any Business-Relat	ed Property You Own o	r Have an Interest In.	List any real estate	in Part 1.
37.	Do	you own or have	any legal or equitable i	nterest in any business-rela	ted property?		
	_	No. Go to Part 6. Yes. Go to line 3					
						Current val portion you Do not dedu claims or ex	own? act secured
38.	Acc	counts receivable	or commissions you a	Iready earned			
		No Yes. Describe					
39.		amples: Business	rnishings, and supplies related computers, softwairs, electronic devices	s vare, modems, printers, copiers	s, fax machines, rugs, telept	nones,	
	_	No Yes. Describe					
40.	Mad	chinery, fixtures,	equipment, supplies yo	ou use in business, and tools	s of your trade		
	ب	No Yes. Describe					
41.	Inve	entory					
	_	No Yes. Describe					
42.	Inte	erests in partners	ships or joint ventures				
	ب	No Yes. Describe	. Name of entity:		% of o	wnership:	
43.	Cus	stomer lists, mail	ing lists, or other comp	ilations			
	س	No Yes. Do your list No Yes. D		dentifiable information (as de	efined in 11 U.S.C. § 101(41	A))? 	
44.	Any	y business-relate	d property you did not	already list			
	لظا	No Yes. Give specif	ic information.				
45.			•	om Part 5, including any ent		→	\$0.00
Pa	art 6			mercial Fishing-Related farmland, list it in Part 1.	d Property You Own o	or Have an Interest I	n.
46.	Do	you own or have	any legal or equitable i	nterest in any farm- or comr	nercial fishing-related prop	perty?	
	<b>☑</b>	No. Go to Part 7. Yes. Go to line 4					

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Debt	or 1	GENE	S.	MOAFANUA	Case number (if known)	
		First Name	Middle Name	Last Name		
						Current value of the portion you own?  Do not deduct secured claims or exemptions.
47.	Farm a		oultry, farm-raised fish			
	✓ No ☐ Yes	S				
48.	Crops-	-either growing	or harvested			
		s. Give specific ormation				
49.	Farm a	nd fishing equip	ment, implements, m	achinery, fixtures, and tools	of trade	
	✓ No ☐ Yes					
50.	Farm a	nd fishing suppl	ies, chemicals, and fe	eed		
	✓ No ☐ Yes	S				
51.	Any fai	rm- and commer	cial fishing-related pr	operty you did not already li	st	
	_	s. Give specific				
52.				m Part 6, including any entri		\$0.00
Pa	rt 7:	Describe All	Property You Ow	n or Have an Interest in	That You Did Not List Abov	ve
53.	-		perty of any kind you ets, country club memb	-		
	✓ No ☐ Yes	s. Give specific i	nformation.			
54.	Add the	e dollar value of	all of your entries fro	m Part 7. Write that number	here	\$0.00

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Debtor 1	GENE	S.	MOAFANUA	Case nu	ımber (if known)			
	First Name	Middle Name	Last Name					
Part 8:	List the Tota	als of Each Part of	this Form					
55. Part 1	l: Total real estat	e, line 2				→		\$0.00
56. Part 2	2: Total vehicles,	line 5		\$2,800.00				
57. Part 3	3: Total personal	and household items,	line 15	\$4,300.00				
58. Part 4	1: Total financial	assets, line 36		\$2,798.00				
59. Part 5	5: Total business	-related property, line	45	\$0.00				
60. Part 6	6: Total farm- and	l fishing-related prope	rty, line 52	\$0.00				
61. Part 7	7: Total other pro	perty not listed, line 5	4 +	\$0.00				
62. Total	personal proper	ty. Add lines 56 throu	gh 61	\$9,898.00	Copy personal property total	<b>→</b> +	<u> </u>	\$9,898.00
63. Total	of all property or	n Schedule A/B. Ad	d line 55 + line 62			[		\$9,898.00

Fill in this in	formation to ide	entify your (	case:			
Debtor 1	GENE	S.	MOAFAN	UA		
Dahtar 0	First Name	Middle Name				
Debtor 2 (Spouse, if filing)	CHRISTINA First Name	M. Middle Name	MOAFAN e Last Name	UA		
United States Ba	inkruptcy Court for	the: <b>DISTRIC</b>	Γ OF NEVADA			☐ Check if this is an
Case number (if known)						amended filing
Official Form	106C					
Schedule C	: The Prope	rty You Cl	aim as Exemp	t		04/1
Using the property space is needed, f	you listed on Sche	edule A/B: Properture this page as m	erty (Official Form 106	SA/B)	as your source, list th	responsible for supplying correct information. ne property that you claim as exempt. If more essary. On the top of any additional pages,
is to state a speci exempted up to the receive certain be exemption of 100	ific dollar amount he amount of any a enefits, and tax-ex % of fair market va	as exempt. Al applicable stat empt retiremen alue under a la	ternatively, you may utory limit. Some ex nt fundsmay be unl w that limits the exe	clair emp imite mptic	n the full fair market tionssuch as those d in dollar amount. on to a particular dol	you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an llar amount and the value of the ole statutory amount.
Part 1: Ide	entify the Prope	erty You Cla	im as Exempt			
1. Which set of	exemptions are y	ou claiming?	Check one only, e	even	if your spouse is filing	g with you.
سنا	claiming state and claiming federal ex		kruptcy exemptions. J.S.C. § 522(b)(2)	11 U.	S.C. § 522(b)(3)	
2. For any prop	erty you list on So	chedule A/B th	at you claim as exen	npt, f	ill in the information	below.
•	of the property an t lists this propert		Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		ck only one box for h exemption	
Brief description:			\$2,100.00	V	\$600.00	Nev. Rev. Stat. § 21.090(1)(f), (p)
•	AND CHEROKEE	(approx.	Ψ2,100.00		100% of fair market	11011 11011 Gtat. 3 2 1.000(1)(1), (p)
210000 miles) 2000 JEEP GR <i>A</i> (approx. 210000	AND CHEROKEE ) miles)	LIMITED			value, up to any applicable statutory limit	
HE WAS IN AN A JUST SEEKING THERE WAS NO	IAS A POSSIBLE ACCIDENT. THE REPAIRS ON HI D PHYSICAL DAI BOUT \$500 OF D e A/B: 3.1	E DEBTOR IS IS VEHICLE. MAGE.				
-	-	-	more than \$160,375?		ed on or after the date	e of adjustment.)
✓ No	d you acquire the p	, ,	l by the exemption with			•

S. **MOAFANUA** Debtor 1 GENE Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and line on **Current value of** Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$700.00 \$700.00 Nev. Rev. Stat. § 21.090(1)(f), (p)  $\square$ 1994 FORD EXPLORER (approx. 400000 100% of fair market miles) value, up to any 1994 FORD EXPLORER 4-door (approx. applicable statutory 400000 miles) limit Line from Schedule A/B: 3.2 Brief description: \$3,000.00 \$3,000.00 Nev. Rev. Stat. § 21.090(1)(b)  $\overline{\mathbf{Q}}$ THE DEBTORS HAVE USED FURNITURE AND 100% of fair market HOUSEHOLD GOODS. value, up to any applicable statutory Line from Schedule A/B: 6 limit Brief description: \$100.00 \$100.00 Nev. Rev. Stat. § 21.090(1)(b) ablaTHE DEBTORS HAVE A ACER LAPTOP. IT IS 100% of fair market 4 YRS OLD. value, up to any applicable statutory Line from Schedule A/B: 7 limit Brief description: \$300.00 \$300.00 Nev. Rev. Stat. § 21.090(1)(i)  $\square$ THE DEBTORS HAVE A GLOCK 9mm 100% of fair market PISTOL. value, up to any applicable statutory Line from Schedule A/B: 10 limit Brief description: \$400.00 \$400.00 Nev. Rev. Stat. § 21.090(1)(b)  $\overline{\mathbf{A}}$ THE DEBTORS HAVE CLOTHING. 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$500.00 Nev. Rev. Stat. § 21.090(1)(a) \$500.00  $\square$ THE DEBTORS HAVE JEWELRY. 100% of fair market value, up to any Line from Schedule A/B: 12 applicable statutory limit Brief description: \$20.00 Nev. Rev. Stat. § 21.090(1)(g) \$15.00  $\square$ THE DEBTORS HAVE SOME CASH ON 100% of fair market HAND. value, up to any (1st exemption claimed for this asset) applicable statutory limit Line from Schedule A/B: 16 Brief description: \$20.00 \$5.00 Nev. Rev. Stat. § 21.090(1)(z)  $\overline{\mathbf{Q}}$ THE DEBTORS HAVE SOME CASH ON 100% of fair market HAND. value, up to any (2nd exemption claimed for this asset) applicable statutory limit Line from Schedule A/B: 16 Brief description: \$0.00 Nev. Rev. Stat. § 21.090(1)(g) \$0.00  $\square$ Checking account (BANK OF AMERICA) 100% of fair market (1st exemption claimed for this asset) value, up to any Line from Schedule A/B: 17.1 applicable statutory limit

S. **MOAFANUA** Debtor 1 GENE Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and line on **Current value of** Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$0.00 \$0.00 Nev. Rev. Stat. § 21.090(1)(z)  $\square$ Checking account (BANK OF AMERICA) 100% of fair market (2nd exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 17.1 limit Brief description: \$5.00 \$0.00 Nev. Rev. Stat. § 21.090(1)(g)  $\overline{\mathbf{Q}}$ Savings account (BANK OF AMERICA) 100% of fair market (1st exemption claimed for this asset) value, up to any Line from Schedule A/B: 17.2 applicable statutory limit \$5.00 Brief description: \$5.00 Nev. Rev. Stat. § 21.090(1)(z)  $\overline{\mathbf{Q}}$ Savings account (BANK OF AMERICA) 100% of fair market П (2nd exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 17.2 limit Brief description: \$1,635.00 \$1,635.00 Nev. Rev. Stat. § 21.090(1)(z)  $\square$ THE DEBTOR HAS 30 SHARES OF STOCK. 100% of fair market HE IS NOT VESTED AT THIS TIME. value, up to any HE GETS 7.5 SHARES IN 10-16. applicable statutory limit Line from Schedule A/B: 18 Brief description: \$200.00 \$200.00 Nev. Rev. Stat. § 21.090(1)(r)  $\overline{\mathbf{Q}}$ THE DEBTOR HAS A 401(k) WITH HIS 100% of fair market **EMPLOYER** value, up to any applicable statutory Line from Schedule A/B: 21 limit Brief description: \$600.00 \$600.00 Nev. Rev. Stat. § 21.090(1)(n)  $\square$ Security deposit on rental unit 100% of fair market value, up to any Line from Schedule A/B: 22 applicable statutory limit Brief description: \$238.00 \$238.00 Nev. Rev. Stat. § 21.090(1)(z)  $\overline{\mathbf{Q}}$ Electric company deposit. 100% of fair market П value, up to any Line from Schedule A/B: 22 applicable statutory limit Brief description: \$100.00 \$100.00 Nev. Rev. Stat. § 21.090(1)(z)  $\square$ Water deposit 100% of fair market value, up to any Line from Schedule A/B: 22 applicable statutory limit

Fill in this info	ormation to ider	ntify your case	<b>:</b> :			
Debtor 1	GENE	S.	MOAFANUA			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	CHRISTINA First Name	M. Middle Name	MOAFANUA Last Name			
(Spouse, it filling)	i iist ivairie	Middle Name	Lastivanie			
United States Bar	nkruptcy Court for the	: DISTRICT OF	NEVADA			
Case number (if known)			_		Check if this is amended filing	
Official Form						
Schedule D:	Creditors W	ho Have Cla	aims Secured by	Property		12/15
correct informatio On the top of any  1. Do any credit  No. Che	n. If more space is additional pages, w ors have claims sec	needed, copy the rite your name as cured by your properties this form to the on below.	ied people are filing toge a Additional Page, fill it on the case number (if know operty?  court with your other sche	out, number the entri n).	es, and attach it to thi	s form.
claim, list the c	ed claims. If a credicted creditor separately for particular claim, list tible, list the claims in e.	r each claim. If m the other creditors	nore than one in Part 2. As	Column A  Amount of claim  Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1			e property that	\$1,500.00	\$2,100.00	
LOAN MAX		secures the	GRAND CHEROKEE			
Creditor's name  2258 ODDIE BL\ Number Street	/D.		10000 miles)			
SPARKS  City  Who owes the det  Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Check if this c to a communit	Debtor 2 only the debtors and anot claim relates by debt	Continge Unliquid Disputer Nature of lie An agree Statutor Judgme Her TITLE	lated d en. Check all that apply. ement you made (such as y lien (such as tax lien, mont lien from a lawsuit ncluding a right to offset)	mortgage or secured	car loan)	

Add the dollar value of your entries in Column A on this page. Write that number here:

\$1,500.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$1,500.00

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Fill in this inf	ormation to ide	entify your case	:	
Debtor 1	GENE	S.	MOAFANUA	
	First Name	Middle Name	Last Name	
Debtor 2	CHRISTINA	М.	MOAFANUA	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the	ne: <b>DISTRICT OF</b>	NEVADA	
Case number (if known)				
,				

#### Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

### Part 1: List All of Your PRIORITY Unsecured Claims

<ol> <li>Do any creditors have</li> </ol>	priority unsecured	d claims a	gainst vou	ı?
---	--------------------	------------	------------	----

No. Go to Part 2.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim Priority Nonpriority amount amount

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Debtor 1	GENE	S.	MOAFANUA	Case number (if known)
	First Name	Middle Name	Last Name	
Part 2:	List All of	Your NONPRIORI	TY Unsecured Claims	
	-		ed claims against you?	
ш.	No. You have not Yes	hing to report in this pa	rt. Submit this form to the co	urt with you other schedules.
If a cr type c	reditor has more the	nan one nonpriority uns ot list claims already in	ecured claim, list the creditor cluded in Part 1. If more tha	of the creditor who holds each claim.  separately for each claim. For each claim listed, identify what in one creditor holds a particular claim, list the other creditors in a Continuation Page of Part 2.
				Total claim
4.1				\$200.00
	Creditor's Name	SERVICE	Last 4 digits of account	number
	33rd STREET N	. SUITE 118	When was the debt inco	
Number	Street			the claim is: Check all that apply.
WICHITA		KS 67205	Disputed	
City		State ZIP Code	Type of NONPRIORITY	unsecured claim:
		Check one.	Student loans	
	r 1 only r 2 only			ut of a separation agreement or divorce
<b>☑</b> Debtor	r 1 and Debtor 2 o		that you did not repo	orofit-sharing plans, and other similar debts
_	st one of the debto		Other. Specify	•
_		or a community debt	Collecting for - R	APID CASH
✓ No Yes	m subject to offs	et?		
4.2				\$1,200.00
AT&T WI			Last 4 digits of account	number
	Creditor's Name LLEY VIEW LAN	IE	When was the debt inco	urred? <u>2014</u>
Number	Street		•	the claim is: Check all that apply.
			Contingent Unliquidated	
DALLAS		TX 75234	Disputed	
City		State ZIP Code	Type of NONPRIORITY	unsecured claim:
		Check one.	Student loans	
	r 1 only r 2 only			ut of a separation agreement or divorce
ш	r 1 and Debtor 2 o	nly	that you did not repo	rt as priority claims profit-sharing plans, and other similar debts
At leas	st one of the debto		Other. Specify	work offering plants, and other offinial dobto
_		or a community debt	Utility Bills	
	m subject to offs	et?		
✓ No ☐ Yes				

S Debtor 1 GENE MOAFANUA Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.3 \$1.800.00 **Business & Professional Coll Serv.** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2014-15 816 S. Center Street Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed 89502 NV Reno State ZIP Code City Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Collecting for -Is the claim subject to offset? **☑** No Yes 4.4 \$200.00 Last 4 digits of account number CHARTER COMMUNICATIONS Nonpriority Creditor's Name When was the debt incurred? 2016 P.O. BOX 60188 As of the date you file, the claim is: Check all that apply. Number Street Contingent ☐ Unliquidated Disputed LOS ANGELES CA 90060 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt  $\overline{\mathbf{A}}$ **Utility Bills** Is the claim subject to offset? ✓ No ☐ Yes 4.5 \$100.00 **CREDIT COLLECTION SERVICES** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2014 2 WELLS AVE. As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated □ Disputed **NEEDHAM HEIGHTS** MA 02459 ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\square$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Collecting for - INFINITY STANDARD Is the claim subject to offset? **☑** No Yes 

S Debtor 1 GENE MOAFANUA Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.6 \$3.00 ENHANCED RECOVERY CORP. Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? VARIES **8014 BAYBERRY RD** Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed **JACKSONVILLE** 32256 FL ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **COLLECTION COMPANY** Is the claim subject to offset? **☑** No Yes 4.7 \$1,500.00 Last 4 digits of account number FINANCIAL ASSISTANCE, INC. Nonpriority Creditor's Name When was the debt incurred? 2014 P.O.BOX 7148 As of the date you file, the claim is: Check all that apply. Number Street Contingent ☐ Unliquidated Disputed **BELLEVUE** WA 98008 Citv State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt  $\overline{\mathbf{A}}$ **Collecting for - MOUNTAIN AMERICA** Is the claim subject to offset? ✓ No ☐ Yes 4.8 \$5,500.00 **LOBEL FINANCIAL** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2015 P.O. BOX 3000 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed **ANAHEIM** CA 92803 City ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\square$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **DEFICIENCY BALANCE** Is the claim subject to offset? **☑** No Yes 

S Debtor 1 GENE MOAFANUA Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.9 \$700.00 MINUTE LOAN CENTER Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2015 1100 E. PLUMB LANE #A Number As of the date you file, the claim is: Check all that apply. Street ☐ Contingent Unliquidated Disputed 89502 **RENO** NV State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Unpaid Loan** Is the claim subject to offset? **☑** No Yes 4.10 \$400.00 **MONEY TREE** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2014 P.O. BOX 58363 As of the date you file, the claim is: Check all that apply. Number Street Contingent ☐ Unliquidated Disputed **SEATTLE** WA 98138 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt  $\overline{\mathbf{A}}$ **Unpaid Loan** Is the claim subject to offset? ✓ No ☐ Yes 4.11 \$2,000.00 **National Business Factors** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2013-15 969 Mica Drive As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed **Carson City** N۷ 89705 City ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\square$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Collecting for - MEDICAL** Is the claim subject to offset? **☑** No Yes 

S Debtor 1 GENE MOAFANUA Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.12 \$600.00 PAYCHECK ADVANCE Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2014 **549 E. PRATER WAY** Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed 89431 **SPARKS** NV City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Unpaid Loan** Is the claim subject to offset? **☑** No Yes 4.13 \$5,500.00 PROFESSIONAL FINANCE CO. Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2015 5754 W. 11th STREET SUITE 100 As of the date you file, the claim is: Check all that apply. Number Street Contingent ☐ Unliquidated Disputed **GREELEY** CO 80634 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt  $\overline{\mathbf{A}}$ **Collecting for - MEDICAL** Is the claim subject to offset? ✓ No ☐ Yes 4.14 \$50.00 RADIOLOGY CONSULTANTS, LTD. Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2016 P.O. BOX 3177 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed **INDIANAPOLIS** IN 46206 ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\square$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Medical Bills** Is the claim subject to offset? **☑** No Yes 

S Debtor 1 GENE MOAFANUA Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.15 \$1,000.00 RENO EMERGENCY PHYSICIANS Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2016 P.O. BOX 95728 Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed **OKLAHOMA CITY** OK 73143 State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Medical Bills** Is the claim subject to offset? **☑** No Yes 4.16 \$200.00 Last 4 digits of account number RENO ORTHOPAEDIC CLINIC Nonpriority Creditor's Name When was the debt incurred? 2016 555 N. ARLINGTON AVE As of the date you file, the claim is: Check all that apply. Street Number Contingent ☐ Unliquidated Disputed **RENO** N۷ 89503 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt  $\overline{\mathbf{A}}$ **Medical Bills** Is the claim subject to offset? ✓ No ☐ Yes 4.17 \$1,900.00 ST. MARY'S Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2016 235 W. 6th STREET As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed **RENO** N۷ 89503 City ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\square$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Medical Bills** Is the claim subject to offset? **☑** No Yes 

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Debtor 1	GENE First Name	S. Middle Name	MOAFANUA Case number (if known) Last Name	
Part 2:	Your NON	PRIORITY Unsecu	red Claims Continuation Page	
previous	•	this page, number the	m sequentially from the	Total claim
T-MOBIL Nonpriority (P.O. BO) Number	Creditor's Name		Last 4 digits of account number  When was the debt incurred? 2014  As of the date you file, the claim is: Check all that apply.	\$700.00
BELLEV		WA 98015	Contingent Unliquidated Disputed	
Debto Debto Debto Debto At leas Check Is the clai	rred the debt? r 1 only r 2 only r 1 and Debtor 2 o st one of the debto	ors and another or a community debt	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Utility Bills	
✓ No ☐ Yes				

Debtor 1 GENE S. MOAFANUA Case number (if known)

First Name Middle Name Last Name

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a.	Domestic support obligations	6a. <b>\$0.00</b>
	6b.	Taxes and certain other debts you owe the government	6b. <b>\$0.00</b>
	6c.	Claims for death or personal injury while you were intoxicated	6c. <b>\$0.00</b>
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. <b>+\$0.00</b>
	6e.	<b>Total.</b> Add lines 6a through 6d.	6d. <b>\$0.00</b>
			Total claim
Total claims from Part 2	6f.	Student loans	6f. <b>\$0.00</b>
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <b>\$0.00</b>
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h. <b>\$0.00</b>
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	<sup>6i.</sup> +\$23,553.00
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j. <b>\$23,553.00</b>

Fill in this inf	ormation to ide				
Debtor 1	GENE	S.	MOAFANUA		
	First Name	Middle Name	Last Name		
Debtor 2	CHRISTINA	M.	MOAFANUA		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for th	ne: <b>DISTRICT OF</b>	NEVADA		
Case number (if known)					Check if thi amended fi

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

    Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
  is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
  executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this inf	ormation to ide				
Debtor 1	GENE	S.	MOAFANUA		
	First Name	Middle Name	Last Name		
Debtor 2	CHRISTINA	М.	MOAFANUA		
(Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Bar	nkruptcy Court for t	he: <b>DISTRICT OF</b>	NEVADA	_	
Case number (if known)					Check if this
,					amended

### Official Form 106H

#### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do you I No Yes	have any codebtors?	(If you are filing a joi	int case, do	o not list either s	spouse a	s a codebtor.)
2.	include A	• •	o, Louisiana, Nevada	, New Mex	co, Puerto Rico	, Texas,	(Community property states and territories Washington, and Wisconsin.)
	V	CHRISTINA M. MU Name of your spouse, for 3310 LUCERNE W. Number Street	AFANUA mer spouse, or legal equiv	_	Nevada	Fill in	n the name and current address of that person
		SPARKS City		tate	<b>89432</b> ZIP Code		

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Debtor 1	GENE	fy your case:	MOAFANUA		
202101	First Name	Middle Name	Last Name	—— Che	eck if this is:
Debtor 2	CHRISTINA	М.	MOAFANUA		An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name	— ⊔	An amended ming
United States Bank	ruptcy Court for the:	DISTRICT OF N	DISTRICT OF NEVADA		A supplement showing postpetition chapter 13 income as of the following date:
Case number					chapter 13 income as of the following date.
(if known)					MM / DD / YYYY
Official Form 10	)6I			_	WWW, 557 1111
Schedule I: Yo	ur Income				12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Describe Employment** Fill in your employment information. Debtor 1 Debtor 2 or non-filing spouse If you have more than one **Employment status** Employed Employed job, attach a separate page with information about Not employed Not employed additional employers. Occupation **WAREHOUSE CASHIER** Include part-time, seasonal, **TESLA MOTORS** McDONALD'S Employer's name or self-employed work. Occupation may include **ELECTRIC DRIVE** 2095 BRIERLEY **Employer's address** student or homemaker, if it Number Street Number Street applies. **SPARKS** NV 89434 **SPARKS** N۷ 89431 Zip Code City State City State Zip Code

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

**6 MONTHS** 

1 MONTH

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

How long employed there?

Official Form 106l Schedule I: Your Income page 1

Debtor 1		GENE	S.	MOAFANUA	Case number (if known)						
		First Name	Middle Name	Last Name	_		_				
					F	or Debtor 1		r Debtor 2 or n-filing spouse			
	Con	v line 4 here		_	4.	\$3,530.71		\$1,148.02	_		
5.	-	all payroll dec		-7		ψ5,550.7 1	-	Ψ1,140.02			
٥.			e, and Social Security d	eductions	5a.	\$344.26		\$131.38			
			ontributions for retireme		5b.	\$0.00	-	\$0.00			
		-	ntributions for retiremer	•	5c.	\$105.93	_	\$0.00			
		-	ayments of retirement fu		5d.	\$0.00	_	\$0.00			
	5e.	Insurance			5e.	\$210.56		\$0.00			
	5f.	Domestic sup	port obligations		5f.	\$0.00	_	\$0.00			
	5g.	Union dues			5g.	\$0.00	_	\$0.00			
	5h.	Other deducti			Eh I	\$141.84		\$0.00			
6.	Add	Specify: See	e continuation sheet eductions. Add lines 5a	a + 5b + 5c + 5d + 5e + 5f +	5h. <b>+</b> 6.	\$802.59	_	\$131.38			
	5g +	- 5h.			7.		_				
7. °			onthly take-home pay.	Subtract line 6 from line 4.	<i>'</i> .	\$2,728.12	-	\$1,016.64			
8.			me regularly received: om rental property and	from operating a	8a.	\$0.00		\$0.00			
	oa.		ofession, or farm	nom operating a	oa.	φυ.υυ	-	φυ.υυ			
		gross receipts	ment for each property ar , ordinary and necessary hly net income.	ĕ							
	8b.	Interest and o	dividends		8b.	\$0.00		\$0.00			
	8c.		ort payments that you, a gularly receive	non-filing spouse, or a	8c.	\$0.00	-	\$0.00			
			ny, spousal support, child ment, and property settler								
	8d	Unemployme	nt compensation		8d.	\$0.00		\$0.00			
	8e.				8e.	\$0.00	-	\$0.00			
	8f.	Other govern Include cash a cash assistand (benefits unde or housing sub	ment assistance that you assistance and the value ce that you receive, such or the Supplemental Nutrit	(if known) or any non- as food stamps			_				
	_	Specify:			. 8f.	\$0.00	-	\$0.00			
	•		etirement income		8g.	\$0.00	_	\$0.00			
	٥n.	Other monthly Specify:	y income.		8h. <b>+</b>	\$0.00	_	\$0.00			
9.	Add	all other inco	<b>me.</b> Add lines 8a + 8b +	8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00	_	\$0.00			
10.			r <b>income.</b> Add line 7 + lining 10 income. Add line 10 for Debtor 1 and D	ne 9. ebtor 2 or non-filing spouse.	10.	\$2,728.12	+	\$1,016.64	=[	\$3,744.76	
11.	Inclu		ns from an unmarried part	expenses that you list in S ner, members of your househ			ır rooi	mmates, and oth	ner		
	Do r	not include any	amounts already included	d in lines 2-10 or amounts tha	t are not	available to pay	exper	ses listed in Scl	hedu	ıle J.	
	Spe	cify:						11.	+	\$0.00	
12.		Add the amount in the last column of line 10 to the amount in line 11.								\$3,744.76	
		me. Write that applies.	amount on the Summary	of Your Assets and Liabilities	and Ce	rtain Statistical In	torma	ition,		Combined	
40		•	luanaaa an daaaaa	ishin sha was steer see the st	h!a f	2			r	monthly income	
13.		you expect an No.		ithin the year after you file t	nis torm	<u> </u>					
		Yes. Explain:	None.								
	_										

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Debtor 1	GENE	S.	MOAFANUA	Case n	number (if known)
	First Name	Middle Name	Last Name		
				For Debtor 1	For Debtor 2 or non-filing spouse
5h. Oth	er Payroll Deduc	tions (details)			non-ming spouse
PR	E-PAID LEGAL			\$18.00	<u> </u>
ST	OCK PURCHAS	E		\$70.61	
LIF	E INSURANCE			\$11.05	
DIS	SABILITY INSUF	RANCE		\$42.18	
			Tota	als: \$141.84	\$0.00

Official Form 106l Schedule I: Your Income page 3

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	ill in this inforn	nation to ident	ify your case:			I		
	Debtor 1	GENE First Name	S. Middle Name	MOA Last Na	FANUA ame	, <del>–</del>	his is: mended filing pplement showing	postpetition
	Debtor 2 (Spouse, if filing)	CHRISTINA First Name	M. Middle Name	MOA Last Na	FANUA ame	chap	oter 13 expenses a wing date:	
	United States Bank	ruptcy Court for the	e: <b>DISTRICT OF</b>	NEVADA		MM /	DD / YYYY	
	Case number (if known)							
Of	ficial Form 10	)6J				_		
Sc	chedule J: Yo	our Expense	es					12/15
cor	rect information. I	If more space is n er (if known). An	needed, attach anot swer every questic	her sheet to	ling together, both and this form. On the top		-	
L		ibe Your Hous	senola					
1.	_ No	ne 2. Debtor 2 live in a s	separate household		es for Separate House	hold of Debt	or 2.	
2.	Do you have dep  Do not list Debtor				Dependent's relati		Dependent's age	Does dependent live with you?
	Debtor 2.		for each dependent		DAUGHTER		2	No No
	Do not state the d names.	ependents'			DAUGHTER		1	- ☑ Yes □ No - ☑ Yes
								□ No - □ Yes
								□ No - □ Yes
								□ No - □ Yes
3.	Do your expense expenses of peo yourself and you	ple other than	✓ No ☐ Yes					_
Р	art 2: Estim	ate Your Ongo	oing Monthly Ex	penses				
to ı		of a date after th	e bankruptcy is file		are using this form as a supplemental Sche			
	•		sh government ass on Schedule I: Your	-	u know the value of icial Form 106I.)		Your expens	ses
4.			penses for your res				4.	\$1,150.00
	If not included in	line 4:						
	4a. Real estate t	axes					4a	
	4b. Property, hor	meowner's, or rente	er's insurance				4b	
	4c. Home mainte	enance, repair, and	d upkeep expenses				4c	
	4d. Homeowner's	s association or co	ndominium dues				4d.	

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**MOAFANUA** Debtor 1 **GENE** Case number (if known) Middle Name First Name Last Name Your expenses Additional mortgage payments for your residence, such as home equity loans 5. **Utilities:** 6. 6a. Electricity, heat, natural gas 6a. \$205.00 6b. Water, sewer, garbage collection 6b. \$60.00 6c. Telephone, cell phone, Internet, satellite, and 6c. \$230.00 cable services 6d. Other. Specify: 6d. Food and housekeeping supplies 7. \$800.00 Childcare and children's education costs 8. \$50.00 Clothing, laundry, and dry cleaning (See continuation sheet(s) for details) 9. \$165.00 10. Personal care products and services 10. \$50.00 11. Medical and dental expenses 11. \$180.00 12. Transportation. Include gas, maintenance, bus or train 12. \$200.00 fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13. \$175.00 magazines, and books 14. Charitable contributions and religious donations 14. \$400.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. 15c. Vehicle insurance \$70.00 15c. 15d. Other insurance. Specify: 15d. 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. Specify: 17. Installment or lease payments: 2000 JEEP GRAND CHEROKEE-TITLE LOAN 17a. Car payments for Vehicle 1 \$473.00 17a. 17b. Car payments for Vehicle 2 17b. Other. Specify: \_\_\_ 17c. 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).

Specify:

19. Other payments you make to support others who do not live with you.

19.

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Deb	tor 1	GENE	S.	MOAFANUA	Case number (if know	n)
		First Name	Middle Name	Last Name		
20.		er real property e edule I: Your Inc		lines 4 or 5 of this form or on		
	20a.	Mortgages on o	other property		20a.	
	20b.	Real estate tax	es		20b.	
	20c.	Property, home	eowner's, or renter's insura	nce	20c.	
	20d.	Maintenance, r	epair, and upkeep expense	20d.		
	20e.	Homeowner's a	association or condominiur	n dues	20e.	
21.	Othe	er. Specify:			21.	+
22.	Calc	ulate your mont	hly expenses.			
	22a.	Add lines 4 thro	ough 21.		22a.	\$4,208.00
	22b.	Copy line 22 (n	nonthly expenses for Debte	or 2), if any, from Official Form 1	06J-2. 22b.	
	22c.	Add line 22a aı	nd 22b. The result is your	monthly expenses.	22c.	\$4,208.00
23.	Calc	ulate your mont	hly net income.			
	23a.	Copy line 12 (y	our combined monthly inco	ome) from Schedule I.	23a.	\$3,744.76
	23b.	Copy your mor	thly expenses from line 22	c above.	23b.	\$4,208.00
	23c.		nonthly expenses from you our monthly net income.	r monthly income.	23c.	(\$463.24)
24.	Do y	ou expect an inc	crease or decrease in you	ır expenses within the year aft	er you file this form?	
				our car loan within the year or d nodification to the terms of your	, , , , ,	
		No.				
		Yes. Explain he		HAS A SPECIAL DIET.		
				into it of Loine Bieli		

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Debtor 1	GENE	S.	MOAFANUA	Case number (if known)	
	First Name	Middle Name	Last Name		
9. <u>Clo</u>	thing, laundry, ar	nd dry cleaning (details):			
CL	OTHING				\$150.00
LA	UNDRY				\$15.00
				Total:	\$165.00

Debtor 1	GENE First Name	S. Middle Name	MOAFANUA Last Name	_	
Dobtor 2	CHRISTINA				
Debtor 2 Spouse, if filing)		M. Middle Name	MOAFANUA Last Name	-	
Jnited States Ba	inkruptcy Court for	the: DISTRICT OF	NEVADA		
Case number					
(if known)				_	eck if this is an ended filing
Official Form	106Sum			_	
		ts and Liabilit	ties and Certain Sta	atistical Information	12/ <sup>-</sup>
Part 1: Su	mmarize Your	Assets			
					Your assets Value of what you owr
Schedule A/E	3: Property (Official	Form 106A/B)			•
1a. Copy line	e 55, Total real esta	ate, from Schedule A	/B		50.00
1b. Copy line	e 62, Total persona	ıl property, from Sche	edule A/B		\$9,898.00
1b. Copy line 1c. Copy line	e 62, Total persona	al property, from Sche	edule A/B		\$9,898.00
1b. Copy line 1c. Copy line	e 62, Total persona e 63, Total of all pro	al property, from Sche	edule A/B		\$9,898.00
1b. Copy line  1c. Copy line  Part 2: Su	e 62, Total persona e 63, Total of all pre mmarize Your  Creditors Who Hav	al property, from Scheoperty on Schedule A  Liabilities  e Claims Secured by	edule A/B  A/B  A/B  A/B  A/B  A/B  A/B  A/B		\$9,898.00 \$9,898.00 Your liabilities Amount you owe
1b. Copy line  1c. Copy line  Part 2: Su  Schedule D: 2a. Copy the  Schedule E/F	e 62, Total personal e 63, Total of all pro emmarize Your  Creditors Who Have total you listed in	property, from Scheol poperty on Schedule A  Liabilities  e Claims Secured by Column A, Amount of the	edule A/B  A/B  Y Property (Official Form 106D of claim, at the bottom of the lates (Official Form 106E/F)		\$9,898.00 \$9,898.00  Your liabilities Amount you owe  D \$1,500.00
1b. Copy line  1c. Copy line  Part 2: Su  Schedule D: 2a. Copy the  Schedule E/F  3a. Copy the	e 62, Total personal e 63, Total of all pro emmarize Your  Creditors Who Have total you listed in E: Creditors Who Have total claims from I	property, from Schedule A Liabilities  e Claims Secured by Column A, Amount of the Column A and the Column A are Unsecured Claims Part 1 (priority unsecured 1)	edule A/B  A	r) est page of Part 1 of Schedule	\$9,898.00  \$9,898.00  Your liabilities Amount you owe  D \$1,500.00  \$0.00

## Part 3: Summarize Your Income and Expenses

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Debtor 1		GENE First Name								
Р	art 4:	Answer T	hese Questions fo	r Administrative and S	Statistical Recor	ds				
6.	Are y	ou filing for ban	kruptcy under Chapte	rs 7, 11, or 13?						
	<ul> <li>No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.</li> <li>✓ Yes</li> </ul>									
7.	7. What kind of debt do you have?									
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.									
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.									
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.  \$4,272.05									
9.	Сору	the following s	pecial categories of cla	nims from Part 4, line 6 of S	chedule E/F:					
						Total claim				
	From	Part 4 on Sche	dule E/F, copy the folio	owing:						
	9a.	Domestic suppor	t obligations. (Copy line	6a.)		\$0.00	-			
	9b.	Taxes and certain	n other debts you owe th	e government. (Copy line 6b	o.)	\$0.00	-			
	9c.	Claims for death	or personal injury while	you were intoxicated. (Copy	line 6c.)	\$0.00	-			
	9d.	Student loans. (0	Copy line 6f.)			\$0.00	-			
	<ol> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)</li> </ol>		did not report as	\$0.00	-					
	9f.	Debts to pension	or profit-sharing plans,	and other similar debts. (Cop	oy line 6h.)	\$0.00	_			

9g. Total. Add lines 9a through 9f.

\$0.00

Fill in this info	ormation to id				
Debtor 1	GENE	S.	MOAFANUA		
	First Name	Middle Name	Last Name		
Debtor 2	CHRISTINA	М.	MOAFANUA		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for				
Case number					Check if this
(if known)				_	amended filin

#### Official Form 106Dec

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below								
Did you pay or agree to pay someone who is N	IOT an attorney to help you fill out bankruptcy forms?							
<b>☑</b> No								
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).							
Under penalty of perjury, I declare that I have r true and correct.	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.							
X /s/ GENE S. MOAFANUA	X /s/ CHRISTINA M. MOAFANUA							
GENE S. MOAFANUA, Debtor 1	CHRISTINA M. MOAFANUA, Debtor 2							
Date 05/20/2016 MM / DD / YYYY	Date 05/20/2016 MM / DD / YYYY							

Fill in	this informat	ion to ider	ntify your cas	se:							
Debtor 1	GENE		S.		MOAFANU	Α					
	First Na	me	Middle Name		Last Name						
Debtor 2		STINA	M.		MOAFANU	Α					
(Spouse	, if filing) First Na	me	Middle Name		Last Name						
United S	tates Bankruptcy	Court for the	: DISTRICT O	F NEV	ADA						
Case nu	mber								☐ Chook:	f this is on	
(if knowr	n)					_			amende	f this is an ed filing	
Official	Farm 107										
	Form 107						_				
Staten	nent of Fina	ancial A	fairs for In	divid	luals Fili	ng for Ban	krupt	tcy			04/16
Be as cor	nplete and accu	rate as poss	ible. If two mar	ried pe	ople are filin	g together, both	are equ	ually res	ponsible f	or supplyi	ng
correct in	formation. If me	ore space is	needed, attach	a sepa	rate sheet to	this form. On the	-	-	-		_
your nam	e and case num	ber (if know	n). Answer eve	ry ques	stion.						
Part 1:	Give Det	aile Ahout	Your Marital	Statu	is and Wh	ere You Lived	d Refo	rΔ			
r dit i.	CIVO DOL	ano About	Tour marka	Otate	o dila Will	510 10a E1100	, BOIO				
1. What	is your current	marital state	us?								
✓ N	//arried										
□ <sup>1</sup>	lot married										
2. Durii	ng the last 3 yea	rs, have you	lived anywhere	e other	than where y	ou live now?					
ш	lo (as List all of the	o places veu	lived in the leat '	2 vooro	Do not inclu	do whore you live	0 004/				
_		e piaces you				de where you live	s HOW.				
D	ebtor 1:			Dates Dived the		Debtor 2:				Dates lived t	Debtor 2
				ived till	310	☐ Same as D	Debtor 1				ame as Debtor
							700101 1			П	ano do Bobioi
<u>1</u> :	34 EAST "I" ST	TREET	F	rom	4-13					From_	
N	umber Street		Т	Го	10-14	Number Street	t			То	
_											
s	PARKS	NV	89431								
Ci		State	ZIP Code			City		State	ZIP Code		
D	ebtor 1:			Dates D		Debtor 2:					Debtor 2
			<u>l</u> i	ived the	ere	_ 0	No. 10 4 a a a 4			lived t	
						☐ Same as D	peptor 1				ame as Debtor
18	855 EL RANCH	10 DR. #34	<b>9</b> F	rom	10-14					From	
_	umber Street		_			Number Street	t			— то –	
				Го	2-16	- <u></u>				'0 _	

**SPARKS** 

NV

89431

ZIP Code

City

State ZIP Code

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Debtor	1 GENE First Name	S. Middle Name	MOAFANUA Last Name	Case nu	mber (if known)	
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
				☐ Same as Debte	or 1	Same as Debtor 1
	3310 LUCERNI	E WAY	From <b>2-16</b>			From
	Number Street		To PRESENT	Number Street		То
	SPARKS City	NV 8943 State ZIP Co		City	State ZIP Code	
	2: Explain	the Sources of `	e H: Your Codebtors (Official land)  Your Income  ment or from operating a bushies and all bushies.	usiness during this ye	-	endar years?
lf y ☑	No	·	income that you receive toge	ether, list it only once u	inder Debtor 1.	
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
	anuary 1 of the co	•	Wages, commissions, bonuses, tips	\$16,200.00	✓ Wages, commissions, bonuses, tips	\$4,200.00
	- , - u u		Operating a business		Operating a business	
For the	last calendar yea	ar:	₩ages, commissions,	\$30,800.00	✓ Wages, commissions,	\$6,000.00
(Januar	y 1 to December 3	31, <u><b>2015</b></u> )	bonuses, tips  Operating a business		bonuses, tips  Operating a business	
For the	calendar year be	fore that:	₩ Wages, commissions,	\$29,100.00	₩ages, commissions,	\$1,500.00
(Januar	y 1 to December 3	31, <b>2014</b> )	bonuses, tips  Operating a business		bonuses, tips  Operating a business	

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Deb	otor 1	GENE First Name	S. Middle Name	MOAFANUA Last Name	Case number (if known)					
5.										
P	art 3:	List Ce	rtain Payments You	ı Made Before You Filed fo	or Bankruptcy					
6.	Are eith	er Debtor	1's or Debtor 2's debts	orimarily consumer debts?						
	□ No.			as primarily consumer debts. On y for a personal, family, or househ	Consumer debts are defined in 11 U.S.C. § 101(8) as nold purpose."					
		During the	he 90 days before you file	ed for bankruptcy, did you pay any	creditor a total of \$6,425* or more?					
No. Go to line 7.										
Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.										
		* Subjec	et to adjustment on 4/01/1	9 and every 3 years after that for	cases filed on or after the date of adjustment.					
	<b>✓</b> Yes	. Debtor	1 or Debtor 2 or both ha	ve primarily consumer debts.						
		During the	he 90 days before you file	ed for bankruptcy, did you pay any	creditor a total of \$600 or more?					
		☑ No.	Go to line 7.							
		☐ Yes.	creditor. Do not include		or more and the total amount you paid that oligations, such as child support and alimony. ruptcy case.					
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.									
	☑ No ☐ Yes. List all payments to an insider.									

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Debtor 1	GENE	S.	MOAFANUA	Case number	er (if known)		
	First Name	Middle Name	Last Name		_		
	n 1 year before yo ïited an insider?	ou filed for bankrupto	y, did you make any payr	nents or transfer any	property on a	ccount of	a debt that
Includ	le payments on de	bts guaranteed or cosi	gned by an insider.				
Ν	0						
ب		nts that benefited an in	sider.				
Part 4:	Identify Le	gal Actions, Repo	essessions, and Fore	eclosures			
List al	Il such matters, incications, and contr	luding personal injury	y, were you a party in any cases, small claims actions			-	-
	es. Fill in the deta			•			D
Case title	INANCIAL V.	Nature of t	he case	Court or agency SPARKS JUST			Status of the case
MOAFAN	_	CIVIL		Court Name			
							On appeal
Case numb	per <b>15-SCV-067</b>	7		Number Street			Concluded
				SPARKS	NV	89434	
				City	State	ZIP Code	<del></del>
seize Check	d, or levied?	fill in the details below	y, was any of your prope	rty repossessed, fore	closed, garnis	ihed, attad	:hed,
			Describe the proper	ty	Date	V	alue of the property
	INANCIAL		MONEY		I-16 AN	D 5-16	\$971.00
Creditor's Na							
	IEDULE 'F" Street		Explain what happe	ned			
ranibei C	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		☐ Property was rep				
			Property was fore				
			✓ Property was gar				
City		State ZIP Code		ached, seized, or levied	l.		

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Deb	tor 1	GENE	S.		DAFANUA	Case number (if	known)			
	Marie I	First Name	Middle Na		t Name	ta a chamba a Caracatal				
11.					any creditor, includ yment because yo	ing a bank or financial i u owed a debt?	institution, set off af	ıy		
	✓ No	. Fill in the details								
12.					ny of your property r another official?	in the possession of a	n assignee for the b	enefit of		
	✓ No ☐ Yes									
P	Part 5: List Certain Gifts and Contributions									
13.	3. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?									
	✓ No ☐ Yes	. Fill in the details	for each gift							
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?									
	□ No ☑ Yes	. Fill in the details	for each gift	or contribution.						
		tributions to chari ore than \$600	ities		Describe what you		Date you contributed	Value		
_		CHURCH FAMIL	Υ				5-14 TO	\$8,000.00		
Chai	rity's Name						5-16			
Num	ber Str	eet			-			_		
RE	NO		NV	89502	-					
City			State	ZIP Code	-					
P	art 6:	List Certain	Losses							
	Within		filed for bar	akruptcy or sinc	e you filed for ban	kruptcy, did you lose ar	nything because of t	heft, fire,		
	✓ No ☐ Yes	. Fill in the details								

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Debtor 1		GENE	S.	MOAFANUA	Case number (if known)			
		First Name	Middle Name	Last Name				
Pa	art 7:	List Certain	Payments or 1	Transfers				
16.			-	tcy, did you or anyone else ac kruptcy or preparing a bankru	ting on your behalf pay or transfer any property to			
	•	-	•		encies for services required for your bankruptcy.			
	<b>⋈</b> No							
	_	. Fill in the details						
17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?								
Do not include any payment or transfer that you listed on line 16.  ☑ No ☐ Yes. Fill in the details.								
								18.
Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.								
	✓ No	. Fill in the details						
40	_			untou did vou tronofor onv ne				
19.		-		called asset-protection devices.	operty to a self-settled trust or similar device of which			
	✓ No ☐ Yes	. Fill in the details						
		1						
Pa	art 8:	List Certain	Financial Acco	ounts, Instruments, Safe	Deposit Boxes, and Storage Units			
20.		l year before you closed, sold, mo	-		nts or instruments held in your name, or for your			
		٥. ٠		r other financial accounts; certifi iations, and other financial instit	cates of deposit; shares in banks, credit unions, brokerage utions.			
	☑ No □ Yes	. Fill in the details						
21.	_			1 vear before vou filed for ban	kruptcy, any safe deposit box or other depository			
		urities, cash, or o						
	☑ No □ Yes	. Fill in the details						
22.	Have yo	ou stored property	y in a storage uni	t or place other than your hon	ne within 1 year before you filed for bankruptcy?			
	✓ No ☐ Yes	. Fill in the details						

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Deb	otor 1	GENE	S.	MOAFANUA	Case number (if known)						
P	First Name Middle Name Last Name  Part 9: Identify Property You Hold or Control for Someone Else										
23.	<ol> <li>Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.</li> </ol>										
	✓ No ☐ Yes	. Fill in the details.									
P	Part 10: Give Details About Environmental Information										
For	the purp	ose of Part 10, the fo	ollowing definitions	apply:							
ı	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.										
				lefined under any environmen uding disposal sites.	tal law, whether you now own, operate, or						
				ental law defines as a hazard inant, or similar item.	ous waste, hazardous substance, toxic						
Rep	ort all no	otices, releases, and	proceedings that yo	ou know about, regardless of	when they occurred.						
24.	Has any law?	governmental unit	notified you that yoι	ı may be liable or potentially l	iable under or in violation of an environmental						
	✓ No ☐ Yes	. Fill in the details.									
25.	☑ No	ou notified any gover	rnmental unit of any	release of hazardous materia	1?						
26.	Have you	ou been a party in ar	y judicial or adminis	strative proceeding under any	environmental law? Include settlements and						
	✓ No ☐ Yes	. Fill in the details.									

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27. \	rt 11: Within 4 busines	years before			nections to Any Business	
27. \	Within 4	years before			nections to Any Business	
		-	you filed for bankrupt			
				cy, did you own	a business or have any of the following connections to any	
		A member of a A partner in a An officer, dire	a limited liability compa	cutive of a corpora		
 			ove applies. Go to Pa apply above and fill in		for each business.	
		-	you filed for bankrupt s, creditors, or other		a financial statement to anyone about your business? Include	
	□ No □ Yes	. Fill in the deta	ails below.			
Pai	rt 12:	Sign Belov	N			
that a	answers erty by	s are true and o fraud in conne	correct. I understand	that making a fa cy case can resu	d any attachments, and I declare under penalty of perjury se statement, concealing property, or obtaining money or It in fines up to \$250,000, or imprisonment for up to 20 years,	
_		E S. MOAFAN			ISTINA M. MOAFANUA	
_		MOAFANUA, D	ebtor 1	_	NA M. MOAFANUA, Debtor 2	
Da	ate	05/20/2016		Date _	05/20/2016	
Did y	ou atta	ch additional p	ages to Your Stateme	ent of Financial A	ffairs for Individuals Filing for Bankruptcy (Official Form 107)?	
☑ N	lo ′es					
Did y	ou pay	or agree to pay	y someone who is no	t an attorney to h	elp you fill out bankruptcy forms?	
☑ Y		me of person _			Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).	

Debtor 1	GENE	S.	MOAFANUA	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	CHRISTINA First Name	M. Middle Name	MOAFANUA Last Name	
· , · · · · · · · · · · · · · · · · · ·				
	nkruptcy Court for	the: <b>DISTRICT OF</b> I	NEVADA	
Case number (if known)	-			☐ Check if this is ar amended filing
				j
Official Form	ı 108			
Statement of	of Intention f	or Individuals	Filing Under Chap	ter 7 12/1
f you are an indiv	vidual filing under	chapter 7, you must	fill out this form if:	
creditors have	claims secured b	y your property, or		
you have lease	ed personal prope	erty and the lease ha	s not expired.	
	hever is earlier, u	•		petition or by the date set for the meeting must also send copies to the creditors
Both debtors mus	st sign and date th	ne form.		for supplying correct information.
•		ssible. If more spac and case number (if	·	te sheet to this form. On the top of any
Part 1: Lis	t Your Credito	rs Who Hold Sec	cured Claims	
-	itors that you liste ormation below.	ed in Part 1 of <i>Sched</i>	lule D: Creditors Who Hold C	Claims Secured by Property (Official Form 106D),
Identify the c	reditor and the pr	operty that is collate	eral What do you inten property that secu	
Creditor's name:	LOAN MAX		☐ Surrender the ☐ Retain the pro	property. No perty and redeem it. Yes
December	210000 miles	RAND CHEROKEE )	Retain the pro Reaffirmation	pperty and enter into a
Description of property securing debt				
property securing debt		red Personal Pro		

yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

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Debtor 1	GENE	S.	MOAFANUA	Case number (if known)
	First Name	Middle Name	Last Name	
Part 3:	Sign Below			
	penalty of perjury, I al property that is s		•	ut any property of my estate that secures a debt and
X /s/ GE	NE S. MOAFANUA	1	X /s/ CHRISTINA M.	MOAFANUA
GENE	S. MOAFANUA, Deb	tor 1	CHRISTINA M. MOA	FANUA, Debtor 2
Date (	05/20/2016		Date <b>05/20/2016</b>	
Ī	MM / DD / YYYY		MM / DD / YY	<del>YY</del>

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
   Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

+		filing fee administrative fee
_	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

## Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Ba$ 

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

# UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA RENO DIVISION

In re GENE S. MOAFANUA Case No. \_\_\_\_\_\_\_
CHRISTINA M. MOAFANUA

				CI	napter	7		
		DISCLOSUR	ΕO	COMPENSATION OF ATTORNE	Y FOR	DEBTOR		
1.	that ser	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) an nat compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for ervices rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case as follows:						
	For	legal services, I have agree	d to a	ccept	,	\$900.00		
	Pric	or to the filing of this stateme	nt I ha	ve received		\$0.00		
	Bala	ance Due			,	\$900.00		
2.	The	e source of the compensatio	n paid	to me was:				
		✓ Debtor		Other (specify)				
3.	The	e source of compensation to	be pa	d to me is:				
		Debtor	$\square$	Other (specify) HYATT LEGAL SERVICES				
4.	V	I have not agreed to share associates of my law firm.	the ab	ove-disclosed compensation with any other per	son unles	ss they are members and		
		3	A copy	-disclosed compensation with another person o r of the agreement, together with a list of the nar	•			

- 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
  - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
  - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030	(Form	2030)	(12/15)
02030 1	LEOIIII	20301	112/13

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

#### CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

> 05/20/2016 /s/ Sean P. Patterson, Esq.

Sean P. Patterson, Esq. Date Sean Patterson., Esq.

232 Court Street Reno, Nv. 89501

Phone: (775) 786-1615 / Fax: (775) 322-7288

Bar No. 5736

/s/ GENE S. MOAFANUA /s/ CHRISTINA M. MOAFANUA

GENE S. MOAFANUA CHRISTINA M. MOAFANUA

# UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA RENO DIVISION

IN RE: GENE S. MOAFANUA
CHRISTINA M. MOAFANUA

CASE NO

CHRISTINA M. MOAFANUA

CHAPTER 7

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her

know	ledge.		
Date	5/20/2016		/s/ GENE S. MOAFANUA GENE S. MOAFANUA
Date	5/20/2016	Signature	/s/ CHRISTINA M. MOAFANUA

CHRISTINA M. MOAFANUA

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AD ASTRA RECOVERY SERVICE MONEY TREE 7330 W. 33rd STREET N. SUITE 11 P.O. BOX 58363 WICHITA, KS 67205

SEATTLE, WA. 98138

Chapter: 7

AT&T WIRELESS 1801 VALLEY VIEW LANE DALLAS, TX 75234

National Business Factors 969 Mica Drive Carson City, Nv. 89705

Business & Professional Coll Se PAYCHECK ADVANCE 816 S. Center Street Reno, Nv. 89502

549 E. PRATER WAY SPARKS, NV 89431

CHARTER COMMUNICATIONS P.O. BOX 60188 LOS ANGELES, CA 90060

PROFESSIONAL FINANCE CO. 5754 W. 11th STREET SUITE 100 GREELEY, CO. 80634

CREDIT COLLECTION SERVICES 2 WELLS AVE. NEEDHAM HEIGHTS, MA 02459 INDIANAPOLIS, IN 46206

RADIOLOGY CONSULTANTS, LTD. P.O. BOX 3177

ENHANCED RECOVERY CORP. 8014 BAYBERRY RD. JACKSONVILLE, FL. 32256

RENO EMERGENCY PHYSICIANS P.O. BOX 95728 OKLAHOMA CITY, OK 73143

FINANCIAL ASSISTANCE, INC. P.O.BOX 7148 BELLEVUE, WA. 98008

RENO ORTHOPAEDIC CLINIC 555 N. ARLINGTON AVE. RENO, NV. 89503

LOAN MAX 2258 ODDIE BLVD. SPARKS, NV 89431

ST. MARY'S 235 W. 6th STREET RENO, NV. 89503

LOBEL FINANCIAL P.O. BOX 3000 ANAHEIM, CA 92803

T-MOBILE P.O. BOX 53410 BELLEVUE, WA 98015

MINUTE LOAN CENTER 1100 E. PLUMB LANE #A RENO, NV 89502

Fill in this i	nformation to id	entify your cas	e:		e box only as direc in Form 122A-1Su	
Debtor 1	GENE	S.	MOAFANUA	_		
	First Name	Middle Name	Last Name	1. There is	no presumption of abus	e.
Debtor 2 (Spouse, if filir	CHRISTINA First Name	M. Middle Name	MOAFANUA Last Name		ulation to determine if a	
Opouso, ii iiiii	ig) i liotitamo	Wildaio Parife	Lactivamo		applies will be made ur est Calculation (Official	
United States	Bankruptcy Court for	the: <b>DISTRICT OF</b>	- NEVADA		ns Test does not apply	
Case number (if known)				of qualifi later.	ed military service but it	could apply
				☐ Check if t	his is an amended filing	
official For	m 122A-1					
hapter 7	Statement of	<b>Your Curren</b>	t Monthly Income			12/
22A-1Supp) w	ith this form.		ption from Presumption of Al	ouse Under § 707(	D)(2) (Official Form	
CILCIH (	Calculate Your C	urrent wonthly	income			
What is yo	ur marital and filing	status? Check one	only.			
☐ Not m	arried. Fill out Colun	nn A, lines 2-11.				
<b>☑</b> Marrie	ed and your spouse	is filing with you.	Fill out both Columns A and B,	lines 2-11.		
☐ Marrie	ed and your spouse	is NOT filing with y	you. You and your spouse ar	e:		
_ r	iving in the same ho	ousehold and are n	not legally separated. Fill out b	ooth Columns A and	d B, lines 2-11.	
	eclare under penalty	of perjury that you a	ed. Fill out Column A, lines 2-1 and your spouse are legally sepons that do not include evading	parated under nonb	ankruptcy law that applie	es or that you
bankruptc August 31. in the resul	y case. 11 U.S.C. § If the amount of you t. Do not include any	101(10A). For example r monthly income varincome amount mo	ived from all sources, derived mple, if you are filing on Septen aried during the 6 months, add to bre than once. For example, if I u have nothing to report for any	nber 15, the 6-mon the income for all 6 both spouses own t	th period would be Marc months and divide the he same rental property	h 1 through total by 6. Fil
				Column A  Debtor 1	Column B  Debtor 2 or non-filing spouse	
_	s wages, salary, tips payroll deductions).	, bonuses, overtim	ne, and commissions	\$3,387.35	\$884.70	
•	nd maintenance pay 3 is filled in.	ments. Do not incl	ude payments from a spouse	\$0.00	\$0.00	
expenses regular con	of you or your depe	ndents, including c married partner, me	r paid for household child support. Include mbers of your household,	\$0.00	\$0.00	

on line 3.

a spouse only if Column B is not filled in. Do not include payments you listed

Deb	tor 1	GENE	S.		AFANUA		Case number (if k	nown)	
		First Name	Middle N	lame Last	Name				
							Column A  Debtor 1	Column B  Debtor 2 or non-filing spouse	
5.	Net ir	ncome from operati	ng a busin	ess, profession, c	or farm				_
				Debtor 1	Debtor 2				
		receipts (before all ctions)		\$0.00	\$0.00				
		ary and necessary o	perating -	\$0.00	\$0.00				
	Net m	nonthly income from ssion, or farm	a business,	\$0.00	\$0.00	Copy here →	\$0.00	\$0.00	
6.	Net ir	ncome from rental a	and other re	eal property					
				Debtor 1	Debtor 2				
		receipts (before all ctions)		\$0.00	\$0.00				
	Ordina	ary and necessary o	perating -	\$0.00	\$0.00	Сору			
		nonthly income from real property	rental or	\$0.00	\$0.00	here →	\$0.00	\$0.00	
7.	Intere	est, dividends, and	royalties				\$0.00	\$0.00	
8.	Unem	nployment compens	sation				\$0.00	\$0.00	
		ot enter the amount if it under the Social S	-						
	Fo	or you			\$0.0	00			
		or your spouse				00			
9.		ion or retirement in benefit under the Se		•	ount received that		\$0.00	\$0.00	
10.	10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.								
11.	Calcu	amounts from separ	ent monthl	y income.				+	
		nes 2 through 10 for add the total for Col			В.		\$3,387.35	+ \$884.70	\$4,272.05  Total current monthly income

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Debtor 1			ENE st Name	<b>S.</b> Middle Name	MOAFANUA Last Name	Case number (if known)
Pa	art 2:		Determine	Whether the Mea	ns Test Applies to You	
12.	Calc	ulate	your curren	t monthly income for t	the year. Follow these steps:	
	12a.	Сор	y your total	current monthly income	from line 11	Copy line 11 here > 12a. \$4,272.05
		Mult	iply by 12 (th	ne number of months in	a year).	X 12
	12b.	The	result is you	ır annual income for this	s part of the form.	12b. <b>\$51,264.60</b>
13.	Calc	ulate	the median	family income that app	plies to you. Follow these step	s:
	Fill in	the s	tate in which	n you live.	Nevada	
	Fill in	the n	umber of pe	ople in your household.	4	
	Fill in	the n	nedian famil	y income for your state a	and size of household	1313.
					ounts, go online using the link special at the bankruptcy cle	·
14.	How	do th	e lines com	pare?		
	14a.		Line 12b is Go to Part		e 13. On the top of page 1, che	eck box 1, There is no presumption of abuse.
	14b.			more than line 13. On a and fill out Form 122A		The presumption of abuse is determined by Form 122A-2.
Pa	art 3:		Sign Belo	w		
	Ву	signin	g here, I ded	clare under penalty of pe	erjury that the information on thi	s statement and in any attachments is true and correct.
			ENE S. MC	NUA, Debtor 1		S/ CHRISTINA M. MOAFANUA CHRISTINA M. MOAFANUA, Debtor 2
	I	Date_	5/20/2016 MM / DD / Y		Date 5/20/2016 MM / DD / YYYY	

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

#### **Current Monthly Income Calculation Details**

In re: GENE S. MOAFANUA Case Number: CHRISTINA M. MOAFANUA Chapter: 7

#### 2. Gross wages, salary, tips, bonuses, overtime and commissions.

Debtor or Spouse's Income	Description (if	Description (if available)						
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month	
Debtor	GROSS INCOME FROM EMPLOYMENT							
	\$3,037.71	\$3,688.58	\$3,720.63	\$3,070.50	\$2,900.41	\$3,906.27	\$3,387.35	
Spouse	GROSS INCOME FROM EMPLOYMENT							
	\$1,018.42	\$1,255.47	\$1,073.60	\$836.51	\$787.10	\$337.12	\$884.70	